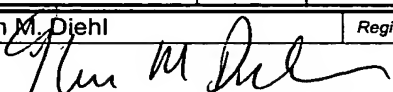


<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. <b>SCEI 3.0-186</b>	
		First Inventor <b>Keisuke Inoue</b>	
		Title <b>METHODS AND APPARATUS FOR TASK MANAGEMENT IN A MULTI-PROCESSOR SYSTEM</b>	
		Express Mail Label No. <b>EV342611681US</b>	
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>53</b>]</span> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul>		8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li><li>b. Specification Sequence Listing on:<ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li>ii. <input type="checkbox"/> Paper</li></ul></li><li>c. <input type="checkbox"/> Statements verifying identity of above copies</li></ul>	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>32</b>]</span>			
5. Oath or Declaration <span style="float: right;">[Total Sheets <b>3</b>]</span> <ul style="list-style-type: none"><li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li><li>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small></li><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></li></ul>		<b>ACCOMPANYING APPLICATION PARTS</b>	
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))			
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <span style="float: right;"><input type="checkbox"/> Power of <small>(when there is an assignee) Attorney</small></span>			
11. <input type="checkbox"/> English Translation Document (if applicable)			
12. <input type="checkbox"/> Information Disclosure <span style="float: right;"><input type="checkbox"/> Copies of IDS <small>Statement (IDS/PTO-1449 Citations</small></span>			
13. <input type="checkbox"/> Preliminary Amendment			
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>			
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>			
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small>			
17. <input type="checkbox"/> Other: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____ <small>Prior application information: Examiner _____ Art Unit: _____</small> <b>For CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
<b>19. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number: <b>000530</b> OR <input type="checkbox"/> Correspondence address below			
Name _____			
Address _____			
City _____		State _____	Zip Code _____
Country _____		Telephone _____	Fax _____
Name (Print/Type) <b>Glen M. Diehl</b>		Registration No. (Attorney/Agent) <b>33,377</b>	
Signature 		Date <b>February 20, 2004</b>	

16562 U.S. PTO  
022004

PTO/SB/17 (10-03)

Approved for use through 7/31/2006. OMB 0651-0032  
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FEE TRANSMITTAL for FY 2004		Complete if Known	
Effective 10/01/2003, Patent fees are subject to annual revision.		Application Number	Not Yet Assigned
		Filing Date	Concurrently Herewith
		First Named Inventor	Keisuke Inoue
		Examiner Name	Not Yet Assigned
		Art Unit	N/A
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	SCEI 3.0-186
TOTAL AMOUNT OF PAYMENT (\$)		1,568.00	

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																		
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">12-1095</span> Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Lerner, David, Littenberg, Krumholz &amp; Mentlik, LLP</span> The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	<div style="font-weight: bold;">3. ADDITIONAL FEES</div> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.7em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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<div style="font-weight: bold;">SUBMITTED BY</div> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.7em;"> <tr> <td>Name (Print/Type)</td> <td>Glen M. Dehl</td> <td>Registration No. (Attorney/Agent)</td> <td>33,377</td> </tr> <tr> <td>Signature</td> <td colspan="2"></td> <td></td> </tr> </table>		Name (Print/Type)	Glen M. Dehl	Registration No. (Attorney/Agent)	33,377	Signature				<div style="font-weight: bold;">(Complete if applicable)</div> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.7em;"> <tr> <td>Telephone</td> <td>(908) 518-6364</td> </tr> <tr> <td>Date</td> <td>February 20, 2004</td> </tr> </table>		Telephone	(908) 518-6364	Date	February 20, 2004																																																																																																																																																																				
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